



## SENIOR & LONG TERM CARE DIVISION COMMUNITY SERVICES BUREAU

### MEDICAID HOSPICE POLICY MANUAL

**Section: GENERAL INFORMATION**

**Subject: Medicaid Hospice  
Definitions**

**Reference: ARM 37.40.801, 42 CFR 418.3**

For purposes of this Policy Manual the following definitions apply:

#### **ATTENDING PHYSICIAN**

A Doctor of medicine or osteopathy who is legally authorized to practice medicine and surgery under the state medical practice act to practice medicine or osteopathy.

An Attending Physician is identified by the member, at the time he or she elects to receive hospice care, as having the most significant role in the determination and delivery of the member's medical care.

#### **BEREAVEMENT COUNSELING**

A service that provides emotional, psychosocial, and spiritual support and is provided before and after the death of the member to assist with issues related to grief, loss, and adjustment.

#### **CAP PERIOD**

The twelve-month period ending October 31 used in the application of the cap on overall hospice reimbursement.

#### **CLINICAL NOTE**

Is a notation of a contact with the member and/or the family that is written and dated by any person providing services and that describes signs and symptoms, treatments and medications administered, including the member's reaction and/or response, and any changes in physical, emotional, psychosocial or spiritual condition during a given period of time.

#### **COMPREHENSIVE ASSESSMENT**

A thorough evaluation of the member's physical, psychosocial, emotional and spiritual status related to the terminal illness and related conditions. This includes a

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thorough evaluation of the caregiver's and family's willingness and capability to care for the member.

### **DIETARY COUNSELING**

The education and interventions provided to the member and family regarding appropriate nutritional intake as the member's condition progresses. Dietary counseling is provided by qualified members, which may include a registered nurse, dietitian or nutritionist, when identified in the member's plan of care.

### **EMPLOYEE**

A person who:

1. Works for the hospice and for whom the hospice is required to issue a W-2 form on his or her behalf;
2. If the hospice is a subdivision of an agency or organization, an employee of the agency or organization who is assigned to the hospice; or
3. Is a volunteer under the jurisdiction of the hospice.

### **HOSPICE**

A public agency or private organization or subdivision of either of these that is primarily engaged in providing hospice care as defined in this section.

### **HOSPICE CARE**

A comprehensive set of services identified and coordinated by an interdisciplinary group to provide for the physical, psychosocial, spiritual, and emotional needs of a terminally ill member and/or family members, as delineated in a specific member plan of care.

### **INITIAL ASSESSMENT**

An evaluation of the member's physical, psychosocial and emotional status related to the terminal illness and related conditions to determine the member's immediate care and support needs.

### **LICENSED PROFESSIONAL**

A person licensed to provide member care services by the State.

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### **MULTIPLE LOCATIONS**

Medicaid-approved locations from which the hospice provides the same full range of hospice care and services that are required of the hospice issued the certification number. A multiple location must meet all of the conditions of participation applicable to hospices.

### **PALLIATIVE CARE**

Member and family-centered care that optimizes quality of life by anticipating, preventing, and treating suffering. Palliative care throughout the continuum of illness involves addressing physical, intellectual, emotional, social, and spiritual needs and to facilitate member autonomy, access to information, and choice.

### **PHYSICIAN**

A doctor of medicine or osteopathy legally authorized to practice medicine and surgery under the state medical practice acts, to practice medicine or osteopathy.

### **PHYSICIAN DESIGNEE**

A Physician designee is a doctor of medicine or osteopathy designated by the hospice who assumes the same responsibilities and obligations as the medical director when the medical director is not available.

### **REPRESENTATIVE**

A member who has the authority under State law (whether by statute or pursuant to an appointment by the courts of the State) to authorize or terminate medical care or to elect or revoke the election of hospice care on behalf of a terminally ill member who is mentally or physically incapacitated. This may include a legal guardian.

### **RESTRAINT**

The use of:

1. Any manual method, physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a member to move his or her arms, legs, body, or head freely, not including devices, such as orthopedically prescribed devices, surgical dressings or bandages, protective helmets, or other methods that involve the physical holding of a member for the purpose of conducting routine physical examinations or tests, or to protect the member from falling out of bed, or to permit the member to participate in activities without the

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risk of physical harm (this does not include a physical escort); or

2. A drug or medication when it is used as a restriction to manage the member's behavior or restrict the member's freedom of movement and is not a standard treatment or dosage for the member's condition.

### **ROUTINE HOME CARE (RHC) RATE**

A rate in which a level of care day will be paid by one of two RHC per diem payment rates. The RHC level of care will be paid depending on the timing of the day within the patient's episode of care. Days 1 through 60 will be paid at the RHC "High" rate while days 61+ will be paid at the RHC "Low" rate.

### **SECLUSION**

The involuntary confinement of a member alone in a room or area from which the member is physically prevented from leaving.

### **SERVICE INTENSITY ADD-ON (SIA) RATE**

A payment for skilled visits (provided by a registered nurse and/or a medical social worker) during the last seven days of life during a hospice election. The SIA payment will be paid in addition to the current per diem rate for the RHC level of care.

### **TERMINALLY ILL**

A member has a medical prognosis that his or her life expectancy is six months or less if the illness runs its normal course.